BIRCH, STEWART, KOLASCH & BIRCH, LLP

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ATTORNEY	DOCKET	NO.

YOU MUST COMPLETE THE FOLLOWING: []

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		(if plural inventors are named below) of the					
Insert Title:	₽	DIRECT INJECTION	DIESEL ENGIN	Ε			
		the specification of which is attached hereto. If not attached hereto,					
Fill in Appropriate		the specification was filed on			as		
Information -		•					
	E P	and amended on		(if a			
		the specification was filed on		as PCT			
		International Application Number		; and was			
		amended on		(if applicable)			
		by any amendment referred to above. I acknowledge the duty to disclose infigures [\$1.56. I do not know and do not believe the thereof, or patented or described in any proprior to this application, that the same was application, that the invention has not be application in any country foreign to the U more than twelve months (six months for on this invention has been filed in any corepresentatives or assigns, except as follows.	e same was ever known or inted publication in any control in public use or on same patented or made the frited States of America of designs) prior to this application for the Unit ws. The same was ever known or any control in any control in application of the Unit ws.	le in the United States of America mo subject of an inventor's certificate is n an application filed by me or my leglication, and that no application for pied States of America prior to this ap States Code, \$119 (a)-(d) of any fore any foreign application for patent or	Code of Federal Regulations. a before my or our invention hereof or more than one year re than one year prior to this sued before the date of this gal representatives or assigns atent or inventor's certificate plication by me or my legal		
		Prior Foreign Application(s)					
Insert Priority		Prior Foreign Application(s)			Priority Claimed		
		2002-319319	Japan	November 1, 200			
(if appropriate)		(Number)	(Country)	(Month / Day / Year Filed)	Yes No		
		(Number)	(Country)	(Month / Day / Year Filed)	Ö Ö		
		(Ivanioer)	(County)	(Monin, Bay, Tem Thea)	Yes No		
		(Number)	(Country)	(Month / Day / Year Filed)	Yes No		
		(Number)	(Country)	(Month / Day / Year Filed)	Yes No		
Insert Provisional Application(s): (if any)	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.						
		(Application Number)			(Filing Date)		
		(Application Number)			(Filing Date)		
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:						
Insert Requested Information: (if appropriate)		Country	A	pplication Number Dat	e of Filing (Month / Day / Year)		
Insert Prior U.S Application(s):		I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:					
(if any)		(Application Number)	(Filing Date)	(Status - patente	d, pending, abandoned)		
		(Application Number)	(Filing Date)	(Status - patente	d, pending, abandoned)		

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO. 2292** P.O. Box 747 • Falls Church, Virginia 22040-0747

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FOLLOWING:							
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE Tanon Tanaka		DATE*		
Insert Name of Inventor Insert Date This Document is Signed	Tamon	TANAKA			November 26, 2003		
Insert Residence	Residence (City, State			CITIZENSHIP			
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Inventor, if any:	Setsuo	NISHIHARA	Setsuo Nishiha	va	2003		
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	77-236, Aza Kubochi, Hosokawa-cho, Okazaki-shi, Aichi, Japan						
Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Bosidanas (City State	2 Country)	<u> </u>	CITIZENSHIP	<u>L</u>		
see above	Residence (City, State & Country) CITIZENSHIP						
AANUNG APPRISCO (Complete Charle Address inch dies City Charle Charle							
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	& Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	& Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
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(Revised 01/02)	• DATE OF SIGNATURE	=					